

Division of Health Service Regulation

STATEMENT OF DEFICIENCIES AND PLAN OF CORRECTION	(X1) PROVIDER/SUPPLIER/CLIA IDENTIFICATION NUMBER: HAL092156	(X2) MULTIPLE CONSTRUCTION A. BUILDING: 01 B. WING: _____	(X3) DATE SURVEY COMPLETED 11/04/2015
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NAME OF PROVIDER OR SUPPLIER

STREET ADDRESS, CITY, STATE, ZIP CODE

HEARTFIELDS AT CARY

1050 CRESCENT GREEN DRIVE
CARY, NC 27511

(X4) ID PREFIX TAG	SUMMARY STATEMENT OF DEFICIENCIES (EACH DEFICIENCY MUST BE PRECEDED BY FULL REGULATORY OR LSC IDENTIFYING INFORMATION)	ID PREFIX TAG	PROVIDER'S PLAN OF CORRECTION (EACH CORRECTIVE ACTION SHOULD BE CROSS-REFERENCED TO THE APPROPRIATE DEFICIENCY)	(X5) COMPLETE DATE
C 000	Initial Comments This is a Report of a Biennial Construction Survey conducted by Greg Cates and Bob Getchell on November 4, 2015. Based on information gathered from our files, the Facility was first licensed on February 3, 1997 for Ninety-Seven (97) residents, including Sixteen (16) Special Care Residents. Based on this information, we are requiring the facility to meet the 1996 Rules for the Licensing of Domiciliary Homes and the 1996 North Carolina State Building Code, Section 419- Institutional Occupancy; and the applicable portions of the 2005 Rules for Adult care Home of Seven or More Beds.	C 000		
C 164	Housekeeping and Furnishings-Clean, Repaired SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (1) have walls, ceilings, and floors or floor coverings kept clean and in good repair; (2) have no chronic unpleasant odors; (3) have furniture clean and in good repair; (a) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the buildings in good repair and clean. Findings include: a- In the 3rd Floor Spa, there are broken ceramic tiles with sharp edges around the inoperative water controls. b- The ceiling in the Chapel has water	C 164		
		C 164	Tiles to be covered and sealed with plates	11-8-15
		C 164	DAMAGE TO BE PATCHED, PAINTED AND PAINTED	12-15-16

Division of Health Service Regulation
LABORATORY DIRECTOR'S OR PROVIDER/SUPPLIER REPRESENTATIVE'S SIGNATURE

TITLE

(X6) DATE

David G. Paine Maintenance Director 12-15-15

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C 164	Continued From page 1 damage. c- The ceiling in the Dining Room has been patched but no finish coat has been applied. d- The side-splash at the sink in the Staff breakroom is rotten, warped, and loose. e- The Staff Toilet on the Terrace Level has stained floors and walls that are stained and in need of repair/ paint. f- The corner bead and door frames are scratched and scarred in Resident Room 3 in the SCU.	C 164		
		C164	CEILING PATCHED AND PAINTED	11-16-15
		C164	SPLASH REMOVED but not painted	1-12-16
		C164	Bathroom to be converted to Storage Room Adding Sign & Latch	12-17-15
		C164	CORNER BEAD COVERED WITH CORNER BOARD AND PAINT APPLIED	11-30-15
C 166	Housekeeping-Maintained Free of Hazards SECTION .0300 - PHYSICAL PLANT 10A NCAC 13F .0306 HOUSEKEEPING AND FURNISHINGS (a) Adult care homes shall: (5) be maintained in an uncluttered, clean and orderly manner, free of all obstructions and hazards; (e) This Rule shall apply to new and existing facilities. This Rule is not met as evidenced by: 1- Based on observations, the facility has failed to maintain the building free of hazards by not storing oxygen containers securely to prevent them from falling over or rolling around. This could affect all persons in the facility as the oxygen containers could fall over, damaging the cylinder or nozzle. Findings include: a- There are unsupported oxygen bottles being stored Room 112. 2- Based on observations, the facility has failed to maintain the width of the EXIT corridor by storing	C 166		
		C166	RESIDENT ON O ₂ GONE	11-30-15

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C 189	Continued From page 3 stairwell beside the service corridor is equipped with a 15-second delay however the signage that designates it as delayed egress is so faded, it cannot be read	C 189	AGREE SIGN (15 sec.) applied to door.	11-19-15
	2- Based on observations, the facility has failed to ensure that the building is safe by not maintaining the fire resistance of building components. This deficiency directly affect all residents, personnel, and visitors by allowing the possible spread of smoke beyond the compartment of origin. Findings include: a- The rated wall around the stair tower in the Boiler Room is damaged with holes exposing the studs and decreasing the rating of the wall. b- There is a transfer grille without a damper cut into the corridor door of the Janitor's Closet on the 3rd floor. c- There is an approximately 18" x 24" hole cut into the corridor/ elevator shaft wall above the ceiling across from Room 307. d- There is an approximately 18" x 12" hole cut into the corridor/ plumbing shaft wall above the ceiling outside Room 318. e- There are multiple cable penetrations above the ceiling on the 2nd Floor including at Room 225, Room 228, and the Wellness Office. f- There is a large hole above the ceiling in the 1st floor kitchen, above the entrance to the Dining Room. g- There are several 3- inch holes above the ceiling above the EXIT door to the South Tower. h- Above the ceiling and sinks in the Main Kitchen, there are several conduits penetrating the wall and have unprotected	C 189	Holes filled w/ Fire Caulk	11-30-15
		C 189	Grills to be modified. REMOVED IF NECESSARY	12-18-15
		C 189	Hole properly sealed by contractor	12-8-15
		C 189	Hole properly sealed by contractor	12-8-15
		C 189	Sealed w/ Fire Caulk	11-18-15
		C 189	To be sealed with Firecore S.R.	12-14-15
		C 189	To be sealed w/ Firecore SR AND Fire Caulk	12-14-15
		C 189	To be sealed w/ 5/8" Firecore S.R. - 1 on 2 layers	11-23-15

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C 189	Continued From page 4 gaps around them. h- The door to the Resident Storage is held open by a wire tied to the handle, preventing it from closing and latching. i- The door from the main corridor to the Laundry area is missing the latch plate and closer. j- The Soiled Linen closet in the SCU is broken and will not close and latch. →	C 189		
		C189	WIRE REMOVED - Door Closed	11-4-15
		C189	Repaired by Contractor 12-9-15	12-8-15
		C189	To be repaired by Contractor	1-12-16
	2 - Based on observations, the facility has failed to maintain an air gap at the ice machines to prevent bacteria from migrating back into the machine. Findings include: a- The condensate pipe for the ice machine in the Main Kitchen is resting on top of the floor drain.	C189	CONDENSATE LINE MODIFIED AND RAISED ABOVE DRAIN	11-18-15
	3- Based on observations, the facility has failed to maintain the plumbing systems safe and operating. Findings include: a- In the 3rd Floor Spa, there is no vacuum breaker for the hand-held wand at the tub.	C189	VACUUM BREAKER INSTALLED	11-18-15
	4- Based on observations, the facility has failed to maintain the safety systems in operating condition. This could affect all occupants of the building in the event of a power failure. Findings include: a- The bracket on the emergency light near the rooftop air conditioning units is broken and the light is hanging by the wires.	C189	Contractor to repair light. Electrician to REPAIR	12-16-15

